

United States District Court

DISTRICT OF

MASSACHUSETTS

SEEKONK HOLDINGS, LLC

SUMMONS IN A CIVIL CASE

V.

CASE NUMBER:

TIMOTHY P. McINERNEY, INDIVIDUALLY AND
IN HIS CAPACITY OF TOWN ADMINISTRATOR
OF THE TOWN OF SEEKONK AND TOWN OF
SEEKONK

04 - 11682 NMG

TO: (Name and address of defendant)

TOWN OF SEEKONK
100 Peck Street
Seekonk, Massachusetts 02771

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

JOHN B. REILLY, ESQ.
JOHN REILLY & ASSOCIATES
300 CENTERVILLE ROAD
SUMMIT WEST - SUITE 330
WARWICK, RI 02886
(401) 739-1800

an answer to the complaint which is herewith served upon you, within 20 (TWENTY) days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

TONY ANASTAS

CLERK

(BY) DEPUTY CLERK



7-29-04

AO 440 (Rev. 10/93) Summons In a Civil Action -SDNY WEB 4/99

RETURN OF SERVICE		
Service of the Summons and Complaint was made by me ¹	DATE	
NAME OF SERVER (PRINT)	TITLE	
<i>Check one box below to indicate appropriate method of service</i>		
<input type="checkbox"/> Served personally upon the defendant. Place where served: _____ _____		
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: _____ _____		
<input type="checkbox"/> Returned unexecuted: _____ _____ _____		
<input type="checkbox"/> Other (specify): _____ _____ _____		
STATEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TOTAL
DECLARATION OF SERVER		
<p style="text-align: center;">I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <p>Executed on _____ Date _____ Signature of Server _____</p> <p style="text-align: right;">Address of Server _____</p>		



Bristol County Deputy Sheriffs' Office • P.O. Box 8928 • New Bedford, MA 02742-0928 • (508) 992-6631

Bristol, ss.

August 16, 2004

I hereby certify and return that on 8/12/2004 at 09:20 am I served a true and attested copy of the Summons and Complaint, Exhibit A - D in this action in the following manner: To wit, by delivering in hand to Janet Parker, agent, person in charge at the time of service for Town of Seekonk, 100 Peck Street, Seekonk, MA 02771. Copies (\$2.00), Conveyance (\$4.50), Travel (\$20.80), Basic Service Fee (\$30.00), Postage and Handling (\$2.75), Attest Fee (\$5.00) Total Charges \$65.05

Deputy Sheriff Benton W Keene, III

Deputy Sheriff